



# BID SOLICITATION

Page 1 of 4  
Printed: 12/1/2004

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
CAPITOL HILL  
PROVIDENCE RI 02908

**BID NUMBER: B04529**

**TITLE: CHECKPRINTING**

**BID OPENING DATE AND TIME:**

**12/20/2004 10:30 AM**

BUYER: JOHN COWELL  
PHONE #: (401) 222 - 2142 ext. 114  
BLANKET PERIOD: 1/1/05 - 12/31/05

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TREASURY  
GT ADMINISTRATIVE OFFICE  
40 FOUNTAIN ST, 7TH FLOOR  
PROVIDENCE RI 02903

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TREASURY  
GT COMPUTER CENTER  
1670 HARTFORD AVE  
JOHNSTON RI 02919

Requisition Number(s): R67A047376

Item	Class-Item	Quantity	Unit	Unit Price	Total
	<p>BLANKET REQUIREMENTS: 01/01/05 - 12/31/05</p> <p>BIDDING</p> <p>(a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State.</p> <p>(b) Quantities, if any, are estimated only. The agreement shall cover the actual quantities ordering during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered.</p> <p>(c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost.</p> <p>(d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request.</p> <p>ORDERING</p> <p>(a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period.</p> <p>(b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.</p>				

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

DELIVERY: \_\_\_\_\_

RIVIP VENDOR ID#: \_\_\_\_\_

TERMS OF PAYMENT: \_\_\_\_\_

**DO NOT SIGN BID ON THIS PAGE!  
USE CERTIFICATION COVER FORM.**



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Item	Class-Item	Quantity	Unit	Unit Price	Total
1.0	AWARDS EXTENDING BEYOND JUNE 30TH ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.  966-13 "CHILD SUPPORT" CHECKS: #CB-2415101 - CB-3115100 * TO MEET REQUIRED SPECIFICATIONS	700.00	M		
2.0	966-13 "TAX REFUND" CHECKS: #TR-1863851 - TR-2363850 * TO MEET REQUIRED SPECIFICATIONS  ALL MUST BE INSIDE DELIVERY TO: COMPUTER CENTER 1670 HARTFORD AVENUE JOHNSTON, RI 02919 ATTN: JANET HEROUX (401)222-2268	500.00	M		

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Requisition Number(s): R67A047376

Item	Class-Item	Quantity	Unit	Unit Price	Total
	<p>THERE IS NOT A LOADING DOCK AT THE DELIVERY LOCATION. DELIVERY TRUCK "MUST" BE EQUIPPED WITH A LIFT GATE, OR SHIPMENT WILL BE REFUSED.</p> <p>SAMPLES OF CHECKS ARE AVAILABLE AT THE TREASURY</p> <p>SHIPMENTS WILL NEED TO BE SPLIT DUE TO THE LACK OF SPACE AT THE COMPUTER CENTER:</p> <p>FIRST SHIPMENT TO BE DELIVERED JANUARY 2, 2005: 300M CHILD SUPPORT 250M TAX REFUND</p> <p>SECOND SHIPMENT: JUNE 2005 200M CHILD SUPPORT 125M TAX REFUND</p> <p>THIRD SHIPMENT: SEPTEMBER 2005 200M CHILD SUPPORT 125M TAX REFUND</p>				

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GT COMPUTER CENTER  
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JOHNSTON RI 02919

Requisition Number(s): R67A047376

Item	Class-Item	Quantity	Unit	Unit Price	Total
	CONTACT PERSON: CINDY GALLUCCI (401) 222-8552  DELIVERY OF GOODS OR SERVICES AS REQUESTED BY AGENCY.				
				TOTAL:	

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

DELIVERY: \_\_\_\_\_

RIVIP VENDOR ID#: \_\_\_\_\_

TERMS OF PAYMENT: \_\_\_\_\_

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USE CERTIFICATION COVER FORM.**

40871135-1210 Moore North America, Inc. ©2001. Secured by Patent 5,018,787, 5,193,853, 5,707,883, 0221

1A-35

1B-35



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS

Citizens Bank  
Providence, RI

57-12  
115

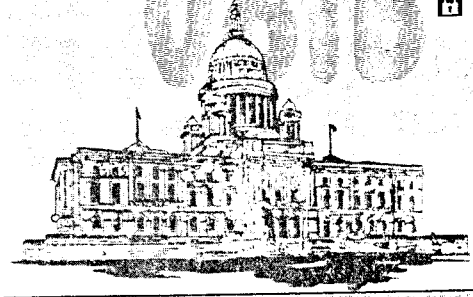
APPROPRIATION ACCOUNT	VOUCHER NUMBER	MO.	DATE		COST CENTER
			DAY	YEAR	

*Red Numbers*  
No. ~~CB-1269633~~  
NOT VALID AFTER 90 DAYS



PAY  
TO THE  
ORDER OF

**VOID**



11 1269633 11 01 1500 1201 1107646 11

"I understand that endorsement hereon or deposit to the accounts of the within named payee is done with the understanding that payment will be from Federal and/or State funds and that any false claims, statements, or documents, or concealment of a material fact, may be prosecuted under applicable Federal or State laws."

Please endorse above.

*[Handwritten signature]*

\*FEDERAL RESERVE BANK REGULATION CC

This document contains security features as listed below, as well as those not listed.

- Security Paper - Hold to light to view watermark
- Chemically sensitized paper
- Security Void Background Pattern
- Micro Print Signature Lines



B1A-35

11/2004

## CHECK SPECIFICATIONS

8 ½” x 3 ½” no stub; continuous form 24 pound paper checks, all to be white stock. All checks are to be prenumbered. The alpha identifier is to be in black ink. The actual check numbers are to be in red ink.

All checks need to have check numbers, bank transfer number, and account number on bottom of check encoded with MICA ink. Check print 2 ink colors on face and gray ink on back. Revision to printing on back of all checks must comply with FEDERAL REGULATIONS. All perforations of checks must meet standard requirements for bursting on automated equipment Standard Register 2500. All checks must comply with **CITIZENS BANK** specifications.

Minimum security features to be included on all checks:

Void pantograph

Lock Box

Micro Line with ‘authorized signature’

Paper stock with manufactured watermark, florescent fibers, and chemical reactive.

<u>Quantity</u>	<u>Check Name</u>	<u>Acct #</u>	<u>From</u>	<u>To</u>	<u>Tint</u>
700M	Family Support (CB-Prefix)	11076461	2415101	3115100	Blue

**\*\*CHECK NUMBER IS NOW TO BE 7-DIGITS**

**OVERAGE OF 5% IS ACCEPTABLE**



## RI Check MICR Specifications

**3½" —**

57-12	115
Fraction	(See Below)

City/State/Zip

Account # 11076461

**RIGHT HAND EDGE  
OF CHECK**

## Personal Checks

# Business Checks

## Deposit Tickets

**BOTTOM OF CHECK**

## The Common Machine Language

F-132-B

**Attention Vendor: Do Not Print "X"**

**Attention Vendor: Do Not**  
**This Indicates Blank Space**

## Numerals

Transit No Symbol

Patent No. 5,000,000

Amount Symbol

## On -Us Symbol

**Dash Symbol**  
See Bank Management Publication #147 by American Bankers Association for detailed printing specifications.

## Printing The Code:

The common machine language characters must be printed as shown to the left within a band  $1/8$ " wide spaced as above. The exact sequence of characters for this customer is illustrated. Where there is a shaded block a blank space must be left. The code must be printed with approved magnetic ink in accordance with specifications outlined in Booklet #147, American Bankers Association.

**To The Printer:**

**Checks must be printed on 24 pound MICR bond.**

Thank You.

DATE \_\_\_\_\_

PREPARED BY

WHITE COPY: CUSTOMER  
YELLOW COPY: BANK COPY

BRANCH #

R156 (Rev. 3/00)

**CLEAR BAND  
(NO MAGNETIC INK PRINTING EXCEPT CODE)**

**Printing The Code:** The common machine language characters must be printed as shown to the left within a band  $\frac{1}{8}$ " wide spaced as above. The exact sequence of characters for this customer is illustrated. Where there is a shaded block a blank space must be left. The code must be printed with approved magnetic ink in accordance with specifications outlined in Booklet #147, American Bankers Association.

**To The Printer:**

**Checks must be printed on 24 pound MICR bond.**

Thank You.

DATE \_\_\_\_\_

PREPARED BY

WHITE COPY: CUSTOMER  
YELLOW COPY: BANK COPY

BRANCH #

R156 (Rev. 3/00)



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS

NOT VALID AFTER 90 DAYS

Citizens Bank  
Providence, RI

57-12  
115

*Red Numbers*  
No. TR-0776219

APPROPRIATION ACCOUNT	VOUCHER NUMBER	DATE			TAX PAYER ID
		MO.	DAY	YEAR	

PAY  
TO THE  
ORDER OF

**VOID**

11076488 10115001201 0776219

"I understand that endorsement hereon or deposit to the accounts of the within named payee is done with the understanding that payment will be from Federal and/or State funds and that any false claims, statements, or documents, or concealment of a material fact, may be prosecuted under applicable Federal or State laws."

Please endorse above.

*NOV*

\*FEDERAL RESERVE BANK REGULATION CC

This document contains security features as listed below, as well as those not listed:



Security Paper - Hold to light to view watermark  
Chemically sensitized paper  
Security Void Background Pattern  
Micro Print Signature Lines

STATE OF RHODE ISLAND - DIVISION OF TAXATION  
TAX REFUND STATEMENT

IF YOU INQUIRE ABOUT YOUR ACCOUNT PLEASE REFER TO THE NUMBERS BELOW.				
CHECK NUMBER	TAXPAYER ID	DOCUMENT LOCATOR NO.	JULIAN DATE	PERIOD ENDING

11/2004

## CHECK SPECIFICATIONS

16" X 3 ½" end to end with stub on right, continuous form 24 pound paper checks, all to be white stock. All checks are to be prenumbered. The alpha identifier is to be in black ink. The actual check numbers are to be in red ink.

All checks need to have check numbers, bank transfer number, and account number on bottom of check encoded with MICA ink. Check print 2 ink colors on face and gray ink on back. Revision to printing on back of all checks must comply with FEDERAL REGULATIONS. All perforations of checks must meet standard requirements for bursting on automated equipment Standard Register 2500. All checks must comply with **CITIZENS BANK** specifications.

Minimum security features to be included on all checks:

Void pantograph

Lock Box

Micro Line with 'authorized signature'

Paper stock with manufactured watermark, florescent fibers, and chemical reactive.

Quantity	Check Name	Acct #	From	To	Tint
500M	Tax Refund (TR-Prefix)	11076488	1863851	2363850	Red

**\*\*CHECK NUMBER IS NOW TO BE 7-DIGITS**

**OVERAGE OF 5% IS ACCEPTABLE**



# RI Check MICR Specifications

3 1/2" ←  
8 1/2" ←

Transit # 57-12  
Fraction 115  
(See Below)

Account Name State of RI - Tax Refund

Account Address \_\_\_\_\_

Account Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Account # 11076488

DOCUMENT  
MAXIMUM SIZE  
3 1/2" x 8 1/2"  
MINIMUM SIZE  
2 3/4" x 6"

RIGHT HAND EDGE  
OF CHECK

## Personal Checks

Serial Number	Account Number	Transit Number
55 54 53 52 51 50 49 48 47 46 45 44 43 42 41 40 39 38 37 36 35 34 33 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1		
I: 0 1 1 5 0 0 1 2 0 1		

## Business Checks

Serial Number	Account Number	Transit Number
55 54 53 52 51 50 49 48 47 46 45 44 43 42 41 40 39 38 37 36 35 34 33 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1		
I: 0 1 1 5 0 0 1 2 0 1	11076488	

## Deposit Tickets

Serial Number	Account Number	Transit Number
55 54 53 52 51 50 49 48 47 46 45 44 43 42 41 40 39 38 37 36 35 34 33 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1		
I: 0 1 1 5 0 0 1 2 0 1	11076488	

CLEAR EDGE  
NO MAGNETIC  
INK OTHER  
THAN MICR  
CODE

3/16" 1/4" 5/16" 3/16"

BOTTOM OF CHECK

AUXILIARY ON-US FIELD	TRANSIT NUMBER FIELD	BANK ON-US FIELD	AMOUNT FIELD
-----------------------	----------------------	------------------	--------------

CLEAR BAND  
(NO MAGNETIC INK PRINTING EXCEPT CODE)

## BOTTOM OF CHECK

The Common Machine Language

E-132-B

Attention Vendor: Do Not Print "X"

This Indicates Blank Space

Numerals 1 2 3 4 5 6 7 8 9 0

Transit No. Symbol

Amount Symbol

On -Us Symbol

Dash Symbol

See Bank Management Publication #147 by American Bankers Association for detailed printing specifications.

## Printing The Code:

The common machine language characters must be printed as shown to the left within a band 1/8" wide spaced as above. The exact sequence of characters for this customer is illustrated. Where there is a shaded block a blank space must be left. The code must be printed with approved magnetic ink in accordance with specifications outlined in Booklet #147, American Bankers Association.

## To The Printer:

Checks must be printed on 24 pound MICR bond.

Thank You.

DATE 2/22/01 PREPARED BY AKA ARy BRANCH # 641

## GENERAL ENDORSEMENT

### ENDORSEMENT CLAUSE TO READ AS FOLLOWS:

“I understand that endorsement hereon or deposit to the accounts of the within named payee is done with the understanding that payment will be from Federal and/or State funds and that any false claims, statements, or documents, or concealment of a material fact, may be prosecuted under applicable Federal or State laws.”

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Please endorse above.